

1. MERCHANT INFORMATION**E-COMMERCE / MOTO MERCHANT PROCESSING APPLICATION & AGREEMENT**

LEGAL NAME OF BUSINESS / IRS FILING NAME (MUST MATCH IRS RECORD)		DBA (DOING BUSINESS AS)			
LOCATION / SITE ADDRESS		CITY	STATE	ZIP CODE	COMPANY WEBSITE ADDRESS (URL)
MAILING ADDRESS (IF DIFFERENT FROM LOCATION)		CITY	STATE	ZIP CODE	COMPANY E-MAIL ADDRESS
COMPANY PHONE #	DESCRIPTOR PHONE # (E-COMMERCE or MOTO)	MOBILE PHONE #	FAX #	CONTACT NAME	TITLE
TAX ID	<input type="checkbox"/> I CERTIFY THAT I'M A FOREIGN ENTITY/NONRESIDENT ALIEN IF CHECKED, PLEASE ATTACH IRS FORM W-8			NOTE: FAILURE TO PROVIDE ACCURATE INFORMATION MAY RESULT IN A WITHHOLDING OF MERCHANT FUNDING PER IRS REGULATIONS (SEE PROGRAM GUIDE PART III, SECTION A.4 FOR DETAILS)	
BUSINESS TYPE	<input type="radio"/> PARTNERSHIP <input type="radio"/> SOLE PROPRIETORSHIP	<input type="radio"/> PUBLIC CORP. <input type="radio"/> PRIVATE CORP.	<input type="radio"/> TAX EXEMPT CORP. <input type="radio"/> LIMITED LIABILITY COMPANY	STATE FILED	BUSINESS START DATE (MM / DD / YYYY)
HAS THIS BUSINESS OR ANY ASSOCIATED PRINCIPAL BEEN TERMINATED AS A VISA / MASTERCARD / AMEX / DISCOVER NETWORK MERCHANT?	<input type="radio"/> YES <input type="radio"/> NO	HAS MERCHANT OR ANY ASSOCIATED PRINCIPAL DISCLOSED BELOW FILED BANKRUPTCY OR BEEN SUBJECT TO AN INVOLUNTARY BANKRUPTCY?			
DO YOU CURRENTLY ACCEPT VISA/MC/AMEX/DISCOVER NETWORK? (IF "YES", YOU MUST SUBMIT 3 MOST CURRENT MONTHLY STATEMENTS)	<input type="radio"/> YES <input type="radio"/> NO	YOUR PREVIOUS CARD PROCESSOR		REASON TO CHANGE	<input type="checkbox"/> RATES <input type="checkbox"/> SERVICE <input type="checkbox"/> OTHER
TERMINATED (MM / DD / YYYY)					
MERCHANT SELLS: (SPECIFY PRODUCT, SERVICE AND/OR INFORMATION)		DO YOU USE ANY THIRD PARTY TO STORE, PROCESS OR TRANSMIT CARDHOLDER'S DATA?			
		<input type="radio"/> YES > IF "YES", NAME OF COMPANY, ADDRESS AND PHONE <input type="radio"/> NO			
REFUND POLICY FOR VISA / MASTERCARD / AMEX / DISCOVER NETWORK SALES		<input type="radio"/> REFUND WILL BE GRANTED TO A CUSTOMER AS FOLLOWS > <input type="radio"/> NO REFUND. ALL SALES FINAL (MERCHANT MUST NOTIFY CUSTOMERS)			
		<input type="radio"/> VISA / MC / AMEX / DISCOVER NETWORK CREDIT > <input type="radio"/> EXCHANGE <input type="radio"/> STORE CREDIT			
		<input type="radio"/> 0-3 DAYS <input type="radio"/> 4-7 DAYS <input type="radio"/> OVER 14 DAYS			

2. OWNERSHIP INFORMATION (LIST PRINCIPALS NAMES THAT OWN COMBINED AT LEAST: 51% FOR CORPORATIONS, 100% FOR PARTNERSHIPS.)

PRINCIPAL NAME (FIRST, ML, LAST) 1)		TITLE		OWNERSHIP (%)	DATE OF BIRTH (MM / DD / YYYY)
HOME ADDRESS		CITY	STATE	ZIP CODE	HOME PHONE #
SOCIAL SECURITY #	DRIVERS LICENSE #	DR.LIC. STATE/EXP DATE	EMAIL	PERSONAL RESIDENCE	FOR HOW LONG? <input type="radio"/> OWN <input type="radio"/> RENT YRS. MO.
PRINCIPAL NAME (FIRST, ML, LAST) 2)		TITLE		OWNERSHIP (%)	DATE OF BIRTH (MM / DD / YYYY)
HOME ADDRESS		CITY	STATE	ZIP CODE	HOME PHONE #
SOCIAL SECURITY #	DRIVERS LICENSE #	DR.LIC. STATE/EXP DATE	EMAIL	PERSONAL RESIDENCE	FOR HOW LONG? <input type="radio"/> OWN <input type="radio"/> RENT YRS. MO.

3. TRADE REFERENCE

VENDOR	ACCOUNT #	CONTACT NAME	PHONE #
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4. CREDIT / DEBIT AUTHORIZATION

BANK NAME			
BANK ROUTING #			
BANK ACCOUNT #			
> MUST ATTACH VOIDED CHECK FROM THIS ACCOUNT			
MERCHANT hereby authorizes SERVICERS in accordance with this MERCHANT Processing Agreement to initiate debit/credit entries to MERCHANT'S checking account, as indicated below. The authority is to remain in full force and effect until (a) SERVICERS have received written notification from a MERCHANT of its termination in such a manner as to afford SERVICERS reasonable opportunity to act on it; and (b) all obligations of MERCHANT to SERVICERS that have arisen under this Agreement have been paid in full. This authorization extends to such entries in such account concerning processing fees, lease, and rental or purchase agreements for POS terminals and/or accompanying equipment and/or check guarantee fees, and amounts due for supplies and materials.			

5. TRANSACTION INFORMATION

FINANCIAL DATA				VISA / MASTERCARD / AMEX / DISCOVER NETWORK INFORMATION				
AVERAGE COMBINED MONTHLY VISA/MC/DISCOVER/AMEX VOLUME		\$ _____		MERCHANT TYPE		NETWORK PROFILE (VISA/MC/AMEX/DISCOVER)		
AVERAGE VISA / MC / AMEX / DISCOVER NETWORK TICKET		\$ _____		<input type="radio"/> RETAIL OUTLET	<input type="radio"/> SWIPED CREDIT CARDS _____ %			
HIGHEST TICKET AMOUNT		\$ _____		<input type="radio"/> RESTAURANT/FOOD	<input type="radio"/> KEYED CREDIT CARDS _____ %			
<input type="checkbox"/> SEASONAL? > HIGHEST VOLUME MONTHS OPEN		\$ _____		<input type="radio"/> LODGING	TOTAL 100 %			
> CHECK APPLICABLE MONTHS BELOW				<input type="radio"/> HOME BUSINESS, TRADE FAIRS	IF KEYED, WHAT % MO/TO INTERNET _____ %			
				<input type="radio"/> OUTSIDE SALES/SERVICE, OTHER, ETC.	MERCHANT RECEIVES IMPRINT ON KEYED TRANSACTIONS <input type="radio"/> YES			
				<input type="radio"/> MAIL/TELEPHONE ORDER ONLY	<input type="radio"/> NO			
				<input type="radio"/> INTERNET				
				<input type="radio"/> HEALTH CARE				
MAIL / TELEPHONE ORDER / BUSINESS TO BUSINESS INFORMATION (ALL QUESTIONS MUST BE ANSWERED BY APPLICABLE TYPE OF MERCHANTS)								
WHAT % OF TOTAL SALES REPRESENT BUSINESS TO BUSINESS (VS. BUSINESS TO CONSUMER)				B2B _____ % + B2C _____ % = 100% TOTAL SALES				
WHAT % OF CREDIT/DEBIT CARD SALES REPRESENT BUSINESS TO BUSINESS (VS. BUSINESS TO CONSUMER)				B2B _____ % + B2C _____ % = 100% TOTAL SALES				
WHAT IS THE TIME FROM TRANSACTION TO DELIVERY? (% OF ORDERS DELIVERED IN DAYS)				VISA/MASTERCARD/AMEX/DISCOVER NETWORK SALES ARE DEPOSITED ON (CHECK ONE)				
0 - 7 DAYS _____ %				<input type="radio"/> DATE OF ORDER	WHO PERFORMS PRODUCT/SERVICE FULFILLMENT?			
+ 8 - 14 DAYS _____ %				<input type="radio"/> DATE OF DELIVERY	<input type="checkbox"/> DIRECT			
+ 15 - 30 DAYS _____ %				<input type="radio"/> OTHER	<input type="checkbox"/> VENDOR (PROVIDE NAME/ADDRESS/PHONE)			
+ OVER 30 DAYS _____ %					<hr/> <input type="checkbox"/> OTHER			
TOTAL 100 % DELIVERED								
DO YOU OWN THE PRODUCT / INVENTORY IS THE PRODUCT STORED AT YOUR BUSINESS LOCATION				PRODUCT SHIPPED BY: <input type="checkbox"/> US MAIL <input type="checkbox"/> OTHER _____				
IF NO, WHERE IS IT STORED _____				DELIVERY RECEIPT REQUESTED <input type="checkbox"/> YES <input type="checkbox"/> NO				
ADVERTISING METHOD(S): CHECK ALL THAT APPLY				REQUIRED: ATTACH MARKETING MATERIALS FOR ALL MAIL ORDER, B2B, INTERNET BUSINESSES WITH OVER \$1 MILLION IN ANNUAL VOLUME. ATTACH WEB PAGE PRINTOUT FOR INTERNET MERCHANTS.				
<input type="radio"/> NEWSPAPERS <input type="radio"/> INTERNET <input type="radio"/> OTHER <input type="radio"/> MAGAZINE <input type="radio"/> RADIO <input type="radio"/> YELLOW PAGES <input type="radio"/> TV								
PERCENTAGE OF PRODUCTS SOLD VIA TELEPHONE ORDERS _____ % MAIL/FAX ORDERS _____ %				INTERNET ORDERS _____ % OTHER _____ %				
WHO ENTERS CREDIT CARD INFO INTO THE PROCESSING SYSTEM				IF CREDIT CARD INFO IS TAKEN OVER THE INTERNET, IS THE PAYMENT CHANNEL ENCRYPTED BY SSL OR BETTER <input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="radio"/> MERCHANT <input type="radio"/> CONSUMER <input type="radio"/> FULFILMENT CENTER <input type="radio"/> OTHER								

6. SITE INSPECTION & BUSINESS INFO

ZONE	<input type="radio"/> COMMERCIAL <input type="radio"/> INDUSTRIAL <input type="radio"/> RESIDENTIAL	APPROX. SIZE, (SQUARE FOOTAGE)	<input type="radio"/> 0-500 SqFt <input type="radio"/> 501-2000 SqFt <input type="radio"/> 2001+ SqFt	MERCHANT LOCATION	<input type="radio"/> SHOPPING CENTER <input type="radio"/> OFFICE BUILDING <input type="radio"/> SEPARATE BUILDING	<input type="radio"/> RESIDENCE <input type="radio"/> MOBILE <input type="radio"/> OTHER: _____
THE MERCHANT	<input type="radio"/> OWNS <input type="radio"/> RENTS <input type="radio"/> LEASES	LANDLORD NAME	LANDLORD PHONE #			
I HEREBY CERTIFY THAT I HAVE PHYSICALLY INSPECTED THE BUSINESS PREMISES OF THE MERCHANT AT THIS ADDRESS AND THE INFORMATION STATED ABOVE IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.						
		SIGNATURE	INSPECTED BY (PRINT NAME)			DATE (MM/DD/YYYY)

7. EQUIPMENT

PAYMENT GATEWAY	> _____	3rd PARTY PROCESSOR > _____					
SOFTWARE	> APPLICATION _____	VERSION # _____	<input type="radio"/> NEW	<input type="radio"/> RENT	<input type="radio"/> LEASE	<input type="radio"/> EXISTING	
CHECK READER	> MODEL _____	QNTY _____	<input type="radio"/> NEW	<input type="radio"/> RENT	<input type="radio"/> LEASE	<input type="radio"/> EXISTING	
TERMINAL	> MODEL _____	QNTY _____	<input type="radio"/> NEW	<input type="radio"/> RENT	<input type="radio"/> LEASE	<input type="radio"/> EXISTING	
PIN-PAD	> MODEL _____	QNTY _____	<input type="radio"/> NEW	<input type="radio"/> RENT	<input type="radio"/> LEASE	<input type="radio"/> EXISTING	
MISCELLANEOUS	> MODEL _____	QNTY _____	<input type="radio"/> NEW	<input type="radio"/> RENT	<input type="radio"/> LEASE	<input type="radio"/> EXISTING	
OTHER	> MODEL _____	QNTY _____	<input type="radio"/> NEW	<input type="radio"/> RENT	<input type="radio"/> LEASE	<input type="radio"/> EXISTING	
LEASE COMPANY: FIRST DATA GLOBAL LEASING							
LEASE TERM		+ ANNUAL TAX HANDLING FEE: \$10.20.	NOTE: THIS IS NON-CANCELABLE LEASE FOR THE FULL TERM INDICATED.				
TOTAL MONTHLY LEASE CHARGE \$ _____		WITHOUT TAXES, FEES OR OTHER CHARGES THAT MAY APPLY, SEE LEASE AGREEMENT IN PROGRAM GUIDE FOR DETAILS.					

8. NETWORK ACCEPTANCE

ACCEPT ALL VISA / MASTERCARD / AMERICAN EXPRESS / DISCOVER NETWORK TRANSACTIONS (PRESUMED, UNLESS ANY SECTION BELOW ARE CHECKED)							
<input type="checkbox"/> ACCEPT VISA CREDIT TRANSACTIONS ONLY		<input type="checkbox"/> ACCEPT MASTERCARD CREDIT TRANSACTIONS ONLY		<input type="checkbox"/> ACCEPT DISCOVER NETWORK CREDIT TRANSACTIONS ONLY		<input type="checkbox"/> ACCEPT DISCOVER NETWORK NON-PIN DEBIT TRANSACTIONS ONLY	
<input type="checkbox"/> ACCEPT VISA NON-PIN DEBIT TRANSACTIONS ONLY		<input type="checkbox"/> ACCEPT MASTERCARD NON-PIN DEBIT TRANSACTIONS ONLY		<input type="checkbox"/> ACCEPT AMERICAN EXPRESS CREDIT TRANSACTIONS ONLY		<input type="checkbox"/> ACCEPT DISCOVER NETWORK NON-PIN DEBIT TRANSACTIONS ONLY	

9. SCHEDULE OF CHARGES / FEES PAYMENT NETWORK INTERCHANGE COST WILL BE CHARGED IN ADDITION TO:

DISCOUNT RATES:		QUALIFIED RATE (ELECTRONIC *)	AUTHORIZATION FEE	Qualified Rate is assessed when your transactions meet certain criteria set by the applicable Association and Processor. When your Card transactions fail to meet those qualification criteria, we will process your transactions at the higher mid-qualified discount rate of _____ % + \$_____ or in certain circumstances, at a non-qualified discount rate (Standard*) of _____ % + \$_____, both rates are a surcharge to the qualified rate.
VISA	%	\$ _____		
MASTERCARD	%	\$ _____		
DISCOVER NETWORK	%	\$ _____		
AMERICAN EXPRESS CREDIT	%	\$ _____		
SIGNATURE DEBIT	%	\$ _____		
OTHER	%	\$ _____		
<input type="checkbox"/> EXISTING AMEX SE #				
ERR:		QUALIFIED RATE	NON-QUALIFIED SURCHARGE	AUTHORIZATION FEE
<input type="checkbox"/> VISA / MC / DISCOVER		%	%	\$ _____
<input type="checkbox"/> AMERICAN EXPRESS CREDIT		%	%	\$ _____
DEBIT:				
MONTHLY ACCESS FEE		\$ _____		
CASH BACK		\$ _____ MAX		
AUTHORIZATION/TRANSACTION FEE		\$ _____ + NETWORK FEES + _____ %		
OTHER FEE		\$ _____		
EBT:		FCS # _____		
		AUTHORIZATION / TRANSACTION FEE \$ _____		
OTHER FEES:		Payment Network Interchange Fees; Debit Network Fees; Returned Item Fee \$25 (charged if NMC debits the bank account but is rejected due to insufficient funds); Decline Fee – An amount equal to Authorization Fee amount and charged per item declined; TIN/TFN invalid monthly fee: \$19.95. Monthly Compliance Fee \$_____; PCI Annual Compliance Fee \$_____; PCI NON-Compliant Monthly Fee \$_____(doesn't affect your compliance responsibilities and obligations associated with your merchant account). You may be charged a Chargeback Research Fee: \$50 per chargeback. Early Termination Fee (ETF) – shall be: (a) average monthly processing fees charged to You for previous 12 months (or such shorter time if you have processed for less than 12 months) multiplied by remaining months of the Agreement, or (b) \$_____, whichever is greater; Annual Fee \$_____. A Capture per item fee of \$_____ is assessed on each bankcard transaction; Monthly Regulatory Fee \$_____; Voice Referral Authorization Fee \$3.50; IVR Voice authorization Fee \$1.50; BIN/ICA Fee \$_____. If applicable, you may be charged additional pass through card brand fees. See description of card brand fees here: http://www.nationalmerchant.com/pdf/CardBrandFeeDescription.pdf		
GATEWAY / VT:				
GATEWAY NAME		\$ _____		
GATEWAY MONTHLY FEE		\$ _____		
GATEWAY PER ITEM FEE		\$ _____		
ADD VIRTUAL TERMINAL		<input type="checkbox"/> YES		
WIRELESS OR REMOTE™:				
SETUP FEE		\$ _____		
TRANSACTION FEE		\$ _____		
MONTHLY FEE		\$ _____		
MISCELLANEOUS :				
<input type="checkbox"/> WEB/G2 MONTHLY MONITORING FEE		\$ _____		
<input type="checkbox"/> EIDS MONTHLY FEE		\$ _____		
<input type="checkbox"/> MERCHANT CLUB		\$ _____		
CHARGEBACK FEE		MINIMUM MONTHLY DISCOUNT \$ _____		
RETRIEVAL REQUEST		APPLICATION FEE \$ _____		
SERVICE FEE		\$ _____		

10. SIGNATURES

Client certifies that all information set forth in this completed Merchant Processing Application is true and correct and that Client has received a copy of the Program Guide (NMC1804-M) and Confirmation Page, which is part of this Merchant Processing Application (consisting of Sections 1-10), and by this reference incorporated herein. (**Program Guide can be downloaded from <http://www.nationalmerchant.com/PDF/ProgramGuideNMC1804M.pdf>.**) Client expressly acknowledges and certifies that Client has read the said Program Guide, and Client agrees to be bound by its terms including but not limited to the early termination fee provision. Client acknowledges and agrees that we, our Affiliates and our third party subcontractors and/or agents may use automatic telephone dialing systems to contact client at the telephone number(s) Client has provided in this Merchant Processing Application and/or may leave a detailed voice message in the event that Client is unable to be reached, even if the number provided is a cellular or wireless number if Client has previously registered on a Do Not Call list or requested not to be contacted Client for solicitation purposes. Client hereby consents to receiving commercial electronic mail messages from us, our Affiliates and our third party subcontractors and/or agents from time to time. Client further agrees that Client will not accept more than 20% of its card transactions via mail, telephone or Internet order. However, if your Application is approved based upon contrary information stated in Section 5, Transaction Information section above, you are authorized to accept transactions in accordance with the percentages indicated in that section. This signature page also serves as a signature page to the Equipment Lease Agreement in the Third Party section of the Program Guide, if selected, the undersigned Client being the "Lessee" for purposes of such Equipment Lease Agreement. Client authorizes National Merchant Center ("NMC") and Wells Fargo Bank, N.A. (a member of Visa USA, Inc. and MasterCard International, Inc.) ("Bank") and their agents to investigate the references, statements and other data contained herein and to obtain additional information from credit bureaus and other lawful sources, including persons and companies names in this Merchant Processing Application. Client authorizes NMC and BANK and their agents (a) to procure information from any consumer reporting agency bearing his/her personal credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, and (b) to contact all previous employers, personal references and educational institutions. It is our policy to obtain certain information in order to verify your identity while processing your account application. The individual who signs this Agreement has authority to do so and to bind its Establishment to the terms and conditions of this Agreement. You further represent that you are authorized to sign and enter into this Agreement on behalf of your establishment, subsidiaries and affiliates.

You further acknowledge and agree that you will not use your merchant account and/or Service for illegal transactions, for example, those prohibited by the Unlawful Internet Gambling Enforcement Act, 31 U.S.C. Section 5361 et seq., as may be amended from time to time, or processing and acceptance of transaction in certain jurisdictions pursuant to 31 CFR part 500 et seq. and other laws enforced by the Office of Foreign Assets Control (OFAC).

Client certifies, under penalties of perjury, that the federal taxpayer identification number and corresponding filing name provided herein are correct. Client agrees to all the terms of this Merchant Processing Application and Agreement. This Merchant Processing Application and Agreement shall not take effect until Client has been approved and this Agreement has been accepted by NMC and Bank. Client's Business Principal(s) / Officer(s):

 MERCHANT PRINCIPAL 1 SIGNATURE _____ TITLE _____ PRINT NAME _____ DATE (MM/DD/YYYY) _____

 MERCHANT PRINCIPAL 2 SIGNATURE _____ TITLE _____ PRINT NAME _____ DATE (MM/DD/YYYY) _____

PERSONAL GUARANTEE

The undersigned guarantees to NMC and Wells Fargo Bank, N.A. (a member of Visa USA, Inc. and MasterCard International, Inc.) ("Bank") the performance of this Agreement, and/or Equipment Lease Agreement, if applicable and any addendum thereto by Client, and in the event of default, hereby waives Notice of Default and agrees to indemnify the other parties, including payment due and owing and costs associated with enforcement of the terms thereof. NMC and Bank shall not be required to first proceed against Client or enforce any other remedy before proceeding against the undersigned individual. This is a continuing guarantee and shall not be discharged or affected for any reason and shall bind the heirs, administrators, representatives and assigns and be enforced by or for the benefit of any successor of NMC and Bank. The term of this guarantee shall be for the duration of the Merchant Processing Application and Merchant Terms and Conditions Agreement and any addendum thereto and shall guarantee all obligations which may arise or occur in connection with my activities during the term thereof through enforcement shall be sought subsequent to any termination.

 SIGNATURE _____ PRINT NAME OF GUARANTOR _____ DATE (MM/DD/YYYY) _____

 SIGNATURE _____ PRINT NAME OF GUARANTOR _____ DATE (MM/DD/YYYY) _____

ACCEPTED BY NATIONAL MERCHANT CENTER

WELLS FARGO BANK, N.A., A MEMBER OF VISA USA, INC. AND MASTERCARD INTERNATIONAL, INC.
1200 MONTEGO WAY, WALNUT CREEK, CA 94598

 ISO SIGNATURE _____ DATE (MM/DD/YYYY) _____

 SIGNATURE _____ DATE (MM/DD/YYYY) _____

TITLE _____

TITLE _____

CONFIRMATION

NMC-1804-M

Please read the Merchant Processing Program Guide in its entirety. It describes the terms under which we will provide merchant processing services to you.

From time to time you may have questions regarding the contents of your Agreement with Bank and/or Processor. The following information summarizes portions of your Agreement in order to assist you in answering some of the questions we are most commonly asked.

1. Your discount rates are assessed on transactions that qualify for certain reduced interchange rates imposed by MasterCard, Visa and Discover Network. Any transactions that fail to qualify for these reduced rates will be charged an additional fee (see Section 19 of the Card Processing Program Guide).
2. We may debit your bank account from time to time for amounts owed to us under the Agreement.
3. There are many reasons why a Chargeback may occur. When they occur we will debit your settlement funds or settlement account. For a more detailed discussion regarding Chargeback's, see Section 10.
4. If you dispute any charge or funding, you must notify us within 45 days of the date of the statement where the charge or funding appears or should have appeared.
5. The Agreement limits our liability to you. For a detailed description of the limitation of liability see Section 21.
6. We have assumed certain risks by agreeing to provide you with Card processing. Accordingly, we may take certain actions to mitigate our risk, including termination of the Agreement, and/or hold monies otherwise payable to you (see Section 24, Term; Events of Default and Section 25, Reserve Account; Security Interest).
7. By executing this Agreement with us you are authorizing us to obtain financial and credit information regarding your business and the signer and guarantors of the Agreement until all your obligations to us are satisfied.
8. The Agreement contains a provision that in the event you terminate the Agreement early, you may be responsible for the payment of early termination fees as set forth in Section 36, Additional Fee Information.
9. If you lease equipment from Processor, it is important that you review Section 35 in Third Party Agreements. This lease is a non-cancelable lease for the full term indicated.

10. Association Disclosure

Visa and MasterCard Member Bank Information: Wells Fargo Bank, N.A.

The Bank's mailing address is 1200 Montego Way, Walnut Creek, CA 94598, and its phone number is (925) 746-4143.

Important Member Bank Responsibilities:

- a) The Bank is the only entity approved to extend acceptance of Visa and MasterCard products directly to a Merchant.
- b) The Bank must be a principal (signer) to the Merchant Agreement.
- c) The Bank is responsible for educating Merchants on pertinent Visa and MasterCard rules with which Merchants must comply; but this information may be provided to you by Processor.
- d) The Bank is responsible for and must provide settlement funds to the Merchant.
- e) The Bank is responsible for all funds held in reserve that are derived from settlement.

Important Merchant Responsibilities:

- a) Ensure compliance with cardholder data security and storage requirements.
- b) Maintain fraud and chargebacks below Association thresholds.
- c) Review and understand the terms of the Merchant Agreement.
- d) Comply with Association rules.

Print Client's Business Legal Name: _____

By its signature below, Client acknowledges that it received the complete Program Guide (Version NMC1804-M) consisting of 33 pages (including this confirmation).

Client further acknowledges reading and agreeing to all terms in the Program Guide, which shall be incorporated into Client's Agreement. Upon receipt of a signed facsimile or original of this Confirmation Page by us, Client's Application will be processed.

Client understands that a copy of the Program Guide is also available for downloading from the Internet at:

<http://www.nationalmerchant.com/PDF/ProgramGuideNMC1804M.pdf>

NO ALTERATIONS OR STRIKE-OUTS TO THE PROGRAM GUIDE WILL BE ACCEPTED AND, IF MADE, ANY SUCH ALTERATIONS OR STRIKE - OUTS SHALL NOT APPLY.



CLIENT'S BUSINESS PRINCIPAL SIGNATURE

TITLE

DATE (MM/DD/YYYY)

PRINT NAME